

## GOVERNMENT OF GUAM KUMISION SETTEFIKASION PARA I MANMANIDUKA

## GUAM COMMISSION FOR EDUCATOR CERTIFICATION

303 University Drive SOE Bldg, Room 105 Mangilao, Guam 96913

Tel: (671) 735-2554-7 FAX: (671) 735-2569 www.gcec.guam.gov (Public Law 31-50 effective 5/23/2011)

## APPLICATION FOR GUAM PROFESSIONAL CERTIFICATION REQUIRED DOCUMENTS CHECKLIST (Please view our website for specific requirements) 1 Copy of current Guam Educator Certificate; 2 Evidence of current SATISFACTORY performance evaluation; and a) Initial: Official transcript(s) from a regionally accredited US college / University. b) Renewal: Official transcript showing required credits and/or documentation of professional activities. Graduates of Foreign Institutions: Course-by-Course Evaluation of degree by an approved educational credentials evaluation service (www.naces.org) TYPE OF REQUEST / CONTACT INFORMATION TYPE OF REQUEST: [ ] Initial [ ] Renewal [ ] Replacement [ ] Extension Request □ Temporary □ Temporary □ Professional Specify: [ ] Endorsement: Basic □ Master Regular Initial Specify: Maiden/Other: Name: First Last Middle Mailing Address: Contact Numbers: (Hm)\_\_\_\_\_\_ (Wk) \_\_\_\_\_ (Cell) \_\_\_\_ Email: DOB: Social Security Number: CERTIFICATION REQUEST 1 Preschool 10 Music 6-12 19 Chamorro language & Culture 2 Early Childhood Pre k-2 11 Physical Education 6-12 20 Elementary K-5 12 Health 6-12 21 Career & Technical Education 4 Art 6-12 13 Science 6-12 **School Counselor** 22 Business Education 6-12 14 Social Studies 6-12 School Librarian 23 Home Economics 6-12 15 Spanish 6-12 **Reading Specialist** Industrial Arts 6-12 16 Japanese 6-12 25 School Administrator Language Arts 6-12 17 Reading K-12 Other: 26 Math 6-12 18 Special Education Pre K-12 \*\*\*\*THIS BOX IS FOR OFFICIAL USE ONLY \*\*\*\*

PERSONAL INFORMATION				
Degree (Undergraduate):	Major/Mino	Major/Minor:		
Name of Institution:				
Degree (Graduate):		Major/Mino	r:	
Name of Institution:		<u> </u>	-	
Other (Approved Program / Terminal Degree):				
Are you presently employed as an educator? Name of School:	[ ] Yes	[ ] No Grade:	Subject:	
Previous full time teaching (please indicate number of	years):			
Guam: Other:				
Valid U.S. teaching certificate:	State/Terr	erritory:		
Have you ever had a U.S teaching certificate/license suspended or revoked?		[ ] No [ ] Yes (If Yes, attach explanation)		
Have you ever been terminated by an employer? If yo	es, Explain [ ] No [ ] Yes			
		[ ] No.   [ ] No.		
Have you ever been denied a renewal of your educat	or certification? If yes, Explain	[ ] No [ ] Yes		
Prior to May 1, 1990, successfully completed the entire Basic English Skills Test of English Proficiency BESTE)?  [] Yes  [] No (if answer is Yes, please skip to next section; otherwise please go on to next question)  Have you taken and successfully completed the entire Guam Educators Test of English Proficiency (GETEP)?  [] Yes  [] No (if answer is Yes, please skip to next section; otherwise please go on to next question)  Have you taken the PRAXIS I / CORE exam?  [] Yes [] No Successfully Passed PRAXIS I / CORE exam? [] Yes [] No				
List other PRAXIS tests that you have successfully Pass	<u>ed.</u>			
CHAMORRO LANGUAGE PROFICIENCY TEST (Skip to n	ext section if not teaching Cha	morro L anguage)		
* Have you taken and passed the Chamorro Language	Proficiency Test? (For Chamorr	o Teachers only) [ ] Yes	[ ] No	
<b>GUAM HISTORY / CULTURE:</b> All persons issued an educational professional certification one (1) such course during the first year after certification deficiency is corrected.				
*Have you taken any course(s) regarding the History/Cultu DISCLAIMER NOTES:  1) Completed request for Professional Certification for 2) Acceptance of application is on the condition that a 3) Ensure that you retain copies of submitted docume 4) Only Official Transcripts (sealed by registrar) are ac 5) A fee will be assessed based on the type of certifical additional requirements for certification, the application 6) Off-island checks are not accepted. Please pay with	orms (4 pages). all required documents are sub ents - GCEC is not responsible fo cceptable for processing of cert ate requested, in accordance w on fee will be required upon re-	or maintaining documents ificate. Transcripts shall no ith <b>Public Law 31-50 §811</b> submission of the applicat	s for applicant use. ot be copied or returned. 14 (b). If the applicant needs to complete	
7) For certificates requested to be mailed, please provide a self addressed stamped envelope (9 x 12) along with your application packet.			ith your application packet.	
Signature of Applicant:		Date:		